

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION: | U.S. | ID NO. | DATE |
|---------------------------|------|--------|----------|
| FEES DETERMINATION | 410 | | 11-15-01 |
| O.I.P.E. CLASSIFIER | Off | 1020 | 11/15/01 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|---|-------------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral)... Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 10/4/01 |
| 2 | ✓ | ✓ | 3/30/01 |
| 3 | ✓ | ✓ | 7/24/01 |
| 4 | ✓ | ✓ | 7/24/01 |
| 5 | ✓ | ✓ | 7/24/01 |
| 6 | ✓ | ✓ | 7/24/01 |
| 7 | ✓ | ✓ | 7/24/01 |
| 8 | ✓ | ✓ | 7/24/01 |
| 9 | ✓ | ✓ | 7/24/01 |
| 10 | ✓ | ✓ | 7/24/01 |
| 11 | ✓ | ✓ | 7/24/01 |
| 12 | ✓ | ✓ | 7/24/01 |
| 13 | ✓ | ✓ | 7/24/01 |
| 14 | ✓ | ✓ | 7/24/01 |
| 15 | ✓ | ✓ | 7/24/01 |
| 16 | ✓ | ✓ | 7/24/01 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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570
11/24